

UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF OKLAHOMA

13-13085

IN RE:
CHARLOTTE ANN MCCLENDON

Debtor

Case No.

Chapter 13

AMENDMENT TO VOLUNTARY PETITION

Amended Schedule A to correct the value of the homestead property and the amount of the secured claim.

Amended Schedule C to correct the value of claimed exemption and current value of property without deducting exemption.

Amended Schedule D to:

1. Correct the Value and Amt. owed to CitiMortgage for the 1st Mortg on the Residence.
2. Add the creditor, Wilshire Credit Corp to schedule D. This creditor was originally listed in schedule F add'l notices to be sent to the original note holder, Master Financial, Inc. and assignee MERS.

Amended schedule F to add creditor(s) which were inadvertently omitted from the original voluntary petition at the time of filing.

DECLARATION CONCERNING DEBTOR'S AMENDED
SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I, declare under penalty of perjury that the amended schedules are true and correct to the best of my knowledge, information, and belief.

Date 7-26-13

Signature

CHARLOTTE ANN MCCLENDON

Debtor

Debtor's Attorney

Chuck Moss, Attorney # 6465
500 N. Meridian # 300
Oklahoma City, OK 73107
(405) 949-5544

United States Bankruptcy Court
Western District of Oklahoma

In re **Charlotte Ann McClendon**

Debtor(s)

Case No. **13-13085**Chapter **7**

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	2 (including Amendment)	\$96,649.00		
B - Personal Property	Yes	3	\$4,200.00		
C - Property Claimed as Exempt	Yes	2 (including amendment)			
D - Creditors Holding Secured Claims	Yes	2 (including amendment)		\$100,744.28	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	9 (including amendment)		\$68,621.50	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	3			\$2,804.94
J - Current Expenditures of Individual Debtor(s)	Yes	2			\$1,570.00
TOTAL		23	\$100,849.00	\$169,365.78	

United States Bankruptcy Court
Western District of Oklahoma

In re **Charlotte Ann McClendon**

Debtor(s)

Case No. 13-13085Chapter 7**STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$0.00
Student Loan Obligations (from Schedule F)	\$0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$0.00
TOTAL	\$0.00

State the following:

Average Income (from Schedule I, Line 16)	\$2,804.94
Average Expenses (from Schedule J, Line 18)	\$1,570.00
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	\$0.00

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$4,095.28
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$0.00
4. Total from Schedule F		\$68,621.50
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$72,716.78

B6A (Official Form 6A) (12/07)

In re Charlotte Ann McClendon

Debtor(s)

Case No. 13-13085**SCHEDULE A - REAL PROPERTY- AMENDED****AMENDED SCHEDULE A TO CORRECT THE VALUE OF THE PROPERTY AND THE AMOUNT OF THE SECURED CLAIM**

Description and Location of Property	Nature of Debtor's Interest in Property	Husband Wife Joint or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
Residence @ 1618 Lily Lane Mustang Lots One (1) and Two (2), of Block Six (6), in Farris Springs Addition, to Mustang, Canadian County, Oklahoma	Fee simple	-	\$96,649.00	\$100,744.28

Total: **\$96,649.00**
 (Report also on Summary of Schedules)

B6C (Official Form 6C) (04/13)

In re **Charlotte Ann McClendon**Case No. **13-13085**

Debtor(s)

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT- AMENDED**TO CORRECT THE VALUE OF CLAIMED EXEMPTION AND CURRENT VALUE OF PROPERTY
WITHOUT DEDUCTING EXEMPTION**

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
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Other Property

Residence @ 1618 Lily Lane Mustang
Lots One (1) and Two (2), of Block Six (6),
in Farris Springs Addition, to Mustang,
Canadian County, Oklahoma

Okla. Stat. tit. 31, §§ 1(A)(1),(2); Okla.
Stat. tit. 31, § 2

96,649.00

96,649.00

Corrected total (including
Amendment) to report on

Summary of Schedules

99,999.00

99,999.00

**Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.*
Schedule of Property Claimed as Exempt consists of 1 total page(s)

In re Charlotte Ann McClendonCase No. 13-13085

Debtor(s)

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS - AMENDED**Amended Schedule D to:**

1. Correct the Value and Amount owed to CitiMortgage for the 1st Mortgage on the Residence
2. Add the creditor Wilshire Credit Corp to schedule D. This creditor was originally listed in schedule F add'l notices to go to original note holder, Master Financial, Inc. and assignee MERS

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above)	C O D E B T O R	H U S B A N D , W I F E , J O I N T O R C O M M U N I T Y	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	C O N T I N G E N T	U N C L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCOUNT NO. <i>n/a</i>			2002					
CitiMortgage P.O. Box 9438 Gaithersburg, MD 20898-9438			First Mortgage Residence @ 1618 E. Lily Lane, Mustang, OK					
	N A				X		\$63,131.28	\$0.00
			VALUE \$96,649.00					
ACCOUNT NO. <i>n/a</i>			2004					
Wilshire Credit Corp NKA Bank of America P.O. Box 5170 Simi Valley CA 93062-5170			Second Mortgage Residence @ 1618 E. Lily Lane, Mustang, OK Additional Notices sent to Master Financial Inc. and Mortg Electronics Registration Systems					
	N A				X		\$37,613.00	\$4,095.28
			VALUE \$96,649.00					
Total(s) (Use only on last page)							\$100,744.28	\$4,095.28

(Report also on Summary of Schedules)

If applicable, report also on Statistical Summary of Certain Liabilities and Related Data)

In re Charlotte Ann McClendon

Debtor(s)

Case No. 13-13085**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS - AMENDED****Amended schedule F to ADD the following creditors**

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding unsecured claims without priority against the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns).

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding secured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
ACCOUNT NO. 356							
Arrow Financial Services LLC P.O. Box 6180 Indianapolis, IN 46206-6180		N A	Notification to creditors new address. This was listed in the original bankruptcy, along with the amount.		X		0.00
ACCOUNT NO. xxxxx9604							
AT&T Corporate - Cingular Wireless Svc 208 South Akard St. Dallas, TX 75202		N A	2006 Cellular service - Collection agency listed on original petition along with amount. This is for notification purposes only.		X		0.00

Sheet 1 of 3 total sheets in Schedule of Creditors
Holding Unsecured Nonpriority Claims

B6F (Official Form 6F) (12/07) - Cont.

In re **Charlotte Ann McClendon**

Case No _____

Debtor(s) _____

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H W J C	Husband, Wife, Joint, or Community	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M. I F C L A I M I S S U B J E C T T O S E T O F F S O S T A T E.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
ACCOUNT NO. 2998 Emergency Management Mid-West Inc. 115 SW 89th Oklahoma City, OK 73139		N A		2010 Medical / Notice was sent to the collection only on the original bankruptcy petition along with the amount. This is for Notification purposes only		X		0.00
ACCOUNT NO. xxxxx5004 Integrus Health Integrus Southwest Medical Center 3300 NW Expressway Street Business Office/0017191A Oklahoma City, OK 73112-4418		N A		2010 Medical		X		188.46
ACCOUNT NO. 4142 Progressive Northern Insurance Company P.O. Box 89490 Cleveland, OH 44101		N A		Loan - Notice was sent to the collection agency in the original filing along with the amount. This is being sent for notification purposes only		X		0.00
ACCOUNT NO. 8515 Radiology Consultants, PC Atten: Bankruptcy Dept. PO Box 95818 Oklahoma City, OK 73143-5818		N A		2007 Medical This debt was originally sent to the collection agency only along with the amount. This is being sent for notification purposes only.		X		0.00

B6F (Official Form 6F) (12/07) - Cont.

In re **Charlotte Ann McClendon**

Case No _____

Debtor(s)

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H U S B A N D W I F E J O I N T O R	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
ACCOUNT NO. xxxxx2190							
Servant Medical Imaging-SMY P.O. Box 366 Broken Arrow, OK 74013-0366		N A	2010 Medical		X		1,218.00
ACCOUNT NO. xxxxxx-xNRSV							
Southwest Radiology Associates P.O. Box 269083 Oklahoma City, OK 73126-9083		N A	2010 Medical		X		0.00
ACCOUNT NO. xx170-1							
Surrey Grand Crown Resort 430 - C Highway 165 South Branson, MO 65616		N A	2009 Time Share awarded to ex-husband This was listed in the original bankruptcy petition under the collection agency along with the amount. This is for notification purposes only		X		0.00
ACCOUNT NO. xxxxx4384							
US Cellular Headquarters 8410 Bryn Mawr Ste 700 Chicago, IL 60631-3486		N A	2011 Cellular Service - notice was sent to collection agency on original petition along with the amount. This is for notification purposes only.		X		0.00
Total Amount to Add (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)							1,406.46

In re Charlotte Ann McClendon

Debtor(s)

Case No. 13-13085**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS - AMENDED****Amended schedule F to DELETE the following creditors:**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER <i>(See instructions above.)</i>	C O D E B T O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
ACCOUNT NO. <i>n/a</i>							
Mortgage Clearing Corporation 1901 E. Voorhees Street, 3C Danville, IL 61834		N A	Delete Creditor. This creditor was the wrong company listed. Amended schedule D to list correct creditor.		X		-32,000.00
ACCOUNT NO. <i>xx7712</i>							
Wilshire Credit Corporation 400 Countrywide Way Simi Valley, CA 93065		N A	Delete this creditor from sch F Moved to Schedule D.		X		-37,613.00
Total amount to Delete (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)							-69,613.00

(Complete Total to report on summary of schedules)
(This includes Amendment to Add and Delete)

68,621.50

CERTIFICATE OF SERVICE

This is to certify that on the 2 day of August, 2013, a copy of Amended Schedules A, C, D, and F were forwarded via U.S. Mail, first Class, postage prepaid, to the following:

Arrow Financial Services LLC
P.O. Box 61810
Indianapolis, IN 46206-6180

AT&T Corporate
Atten: Cingular Wireless
208 South Akard St.
Dallas, TX 75202

Chase
Formerly WAMU
P.O. Box 15298
Wilmington DE 19850-5298

Emergency Mgmt Mid-West Inc.
115 SW 89th
Oklahoma City, OK 73139

Integrus Health
Integrus Southwest Medical Center
3300 NW Expressway Street
Business Office/0017191A
Oklahoma City, OK 73112-4418

Progressive Northern Insurance Company
P.O. 89490
Cleveland, OH 44101

Radiology Consultants, Inc.
Atten: Bankruptcy Dept.
P.O. Box 95818
Oklahoma City, OK 73143-5818

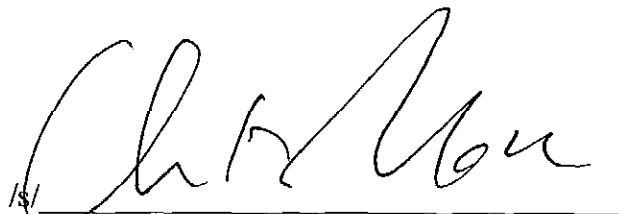
Servant Medical Imaging-SMY
P.O. Box 366
Broken Arrow, OK 74013-0366

Southwest Radiology Associates
P.O. Box 269083
Oklahoma City, OK 73126-90853

Surrey Grand Crown Resort
430 – C Highway 165 South
Branson, MO 65616

US Cellular Headquarters
8410 Bryn Mawr Ste 700
Chicago, IL 60631-3486

Wilshire Credit Corp
Nka Bank of America
P.O. Box 5170
Simi Valley, CA 93062-5170

A handwritten signature in black ink, appearing to read "Chuck Moss", written over a horizontal line.

/s/ Chuck Moss, Attorney OBA 6465
500 N. Meridian Ave. Ste 300
Oklahoma City, OK 73107
Chuck@mossbankruptcy.com
(405) 949-5544 fax (405) 949-5572

**UNITED STATES BANKRUPTCY COURT
WESTERN DISTRICT OF OKLAHOMA**

IN RE:

CHARLOTTE ANN MCCLENDON

Debtor(s)

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Case No. 13-13084

Chapter 7

VERIFICATION OF AMENDED CREDITOR MATRIX

The above-named Debtor hereby verifies that the attached listed of amended creditors is true and correct to the best of her knowledge.

Debtor

Date

7-26-13

Signature



CHARLOTTE ANN MCCLENDON

Arrow Financial Services LLC
P.O. Box 61810
Indianapolis, IN 46206-6180

AT&T Corporate
Atten: Cingular Wireless
208 South Akard St.
Dallas, TX 75202

Chase
Formerly WAMU
P.O. Box 15298
Wilmington DE 19850-5298

Emergency Mgmt Mid-West Inc.
115 SW 89th
Oklahoma City, OK 73139

Integris Health
Integris Southwest Medical Center
3300 NW Expressway Street
Business Office/0017191A
Oklahoma City, OK 73112-4418

Progressive Northern Insurance Company
P.O. 89490
Cleveland, OH 44101

Radiology Consultants, Inc.
Atten: Bankruptcy Dept.
P.O. Box 95818
Oklahoma City, OK 73143-5818

Servant Medical Imaging-SMY
P.O. Box 366
Broken Arrow, OK 74013-0366

Southwest Radiology Associates
P.O. Box 269083
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430 -- C Highway 165 South
Branson, MO 65616

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8410 Bryn Mawr Ste 700
Chicago, IL 60631-3486

Wilshire Credit Corp
Nka Bank of America
P.O. Box 5170
Simi Valley, CA 93062-5170